POLODSIAI

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u></u>
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number))
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ProTech Security S	Systems of Davie, INC	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Luis Echeverry		
•		Name of Contact Persor	1
	ProTech Security Systems of	Davie, INC	
•		Firm/ Company	_
	2901 NW 28th Street		
		Address	
	Lauderdale Lakes, Fla. 3331	I	
•		City/ State and Zip Code	e
Luis@	ganc360.com		
		sed for future annual report	notification)
		•	
For further information	concerning this matter, pleas	se call:	
Luis Echeverry		at (274-6201
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314			Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida D	ept. of State)		
P01000053121				
(Document Number	of Corporation (if known)	<u> </u>		
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation	adopts the following ame	ndmen	it(s) to
A. If amending name, enter the new name of the corporation:				
N/A		The	пеш	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or word "chartered." "professional association." or the abbreviation	"Co". A professional corp	rporated" or the abbrev oration name must conta	iation in the	
B. Enter new principal office address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADDRESS)	N/A			
	N/A	F 1	<u>α</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	; ·	HAN I	117
	N/A			
	N/A		بب	•
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		name of the	0.0	
Name of New Registered Agent N/A				
N/A				
(Florida s	street address)			
		. Florida		
New Registered Office Address: N/A		(Zip Code)		

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Jo</u>	ohn_Doc	
X Remove	<u>Y</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	Luis Echeverry	2901 NW 28th Street
_ X _ Add			Lauderdale Lakes, Fla. 33311
Remove			
2) Change		N/A	N/A
Add			N/A
Remove			N/A
3) Change		N/A	N/A
Add		-	N/A
Remove			N/A
4) Change		N/A	N/A
Add			N/A
Remove			N/A
5) Change		N/A	N/A
Add	<u>=</u>		N/A
Remove			N/A
		N/A	N/A
6) Change			N/A
Add			N/A
Remove			13/13

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A
IS/A

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
	8/2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 50 days after amenament fite date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, thi partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendmenticient for approval.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
-	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholde	r
03/08/2018 Dated () Signature	Ar-	
selecte	rector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	
	Jay Rosen	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	